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THE THERAPEUTIC SIGNIFICANCE OF ANXIETY

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Introduction

THE theme of this paper is the therapeutic significance of the anxiety reaction. I shall submit and defend the proposition that anxiety is the awareness of some threat to the integrity of the personality and that as such it is not an evil but may be a pre-condition of growth. Using the term "anxiety" to denote fear, worry, sense of guilt, distress of mind which is due rather to deep-seated insecurity or to the operations of an uneasy conscience than to external danger, I shall try to show that even in extreme forms, such as acute psychosis, it may be analogous to fever or inflammation in the body and as such a manifestation of nature's power to heal.

I have selected this subject because it is close to the heart of my own philosophy of life and of my own theory of mental illness and because I find myself at variance with much of the current thinking on the subject.

The controversial character of the issues involved was brought home to me very sharply some twenty-three years ago at a meeting of the American Sociological Society when our project for the clinical training of theological students was presented by Dr. Hill before the section on the sociology of religion. In the discussion which followed the pre-

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sentation I gave utterance to the view that there was much to support the old theological doctrine that the conviction of sin was the first step in the process of salvation. Immediately a storm broke loose. A number of those present looked upon such a view as dangerous heresy. In the years that have followed I have had ample opportunity to observe how widespread is the view that conscience ought to be spanked or eliminated and that the church and its ministers are responsible for much unnecessary suffering in that they try to make people too good.

The recent book by Rollo May, *The Meaning of Anxiety*[1] has therefore been of great interest to me. His findings are quite in line with my own view, particularly his conclusion that anxiety is the awareness of a threat to some value which is regarded as vital, and that creativity results when one moves resolutely through the anxiety-creating situation.

While I am thus in whole-hearted agreement with May's general thesis, my attention has been drawn to a statement of his that *in severe clinical cases anxiety is often experienced as a dissolution of the self* (pp. 192-3). This statement seems at variance with his general conclusions and I question whether he would wish to defend it. Nonetheless it reflects a widespread view. I propose therefore to show that *the threat which arouses the anxiety in psychotic cases is precisely that of dissolution and that when dissolution has taken place, anxiety tends to disappear.*

I

A case of severe anxiety due to an uneasy conscience may help us to clarify the more important issues involved:

> The patient in question, John P., was a brick-mason of 38 years who was brought to the hospital in an extremely agitated condition. He was afraid something was going to happen to his wife and he would not allow her nor his children out of sight. He thought he was going to die and he read mysterious meanings into the most trivial happenings.
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> His history showed that he was an illegitimate child and had never known who his parents were. As a baby he was a ward of the state and at the age of two he was adopted by a childless couple. His foster-parents were good people in moderate circumstances. They gave him real affection and brought him up to go to Sunday School and Church. When he was twelve years of age both his foster-parents died and he went to live with a sister of his foster-mother.

[1] New York, Ronald Press, 1950.

In school he did good work, graduating with honors from a technical high school at the age of seventeen. He then got work as a brick-mason. He is said to be an excellent workman. He made good wages, but work was irregular and he has never known how to save money. During the war he served with the Navy.

In appearance he is short in stature but of athletic build and quick in action. He is said to have been a good ball-player and something of a singer, having a good baritone voice. Although he has shown little interest in religion he still accepts the ethical standards of the church as his own. He is a member of the Odd Fellows' Lodge. He is socially inclined, convivial, sentimental, and well-liked.

The chief maladjustment seems to lie in the sexual sphere. He reports promiscuous heterosexual relations, beginning in his fifteenth year, with regular prostitutes and with those of the clandestine variety. Upon his return from the Navy he went to live with a family with whom he had boarded before his enlistment. This family consisted of a man of sixty-five and his unmarried daughter, a woman of about thirty-five. They were very kind to him and the daughter performed all sorts of little services for him. Their relationship became intimate and the woman became pregnant. The situation was met by an operation for abortion. The relationship was not discontinued and again an operation was performed. A few years later the woman died of carcinoma.

In the meantime he became acquainted with the woman whom he later married. He met her at a dance and at once fell in love with her. It was not long before she also was in trouble. He offered to marry her and did so, but not before an abortion had been performed. At the time of admission they had been married three and a half years and had two small boys, one two and a half and the other one year old. Both were healthy and attractive children. The wife was of good middle-class family. She was a good house-keeper and in spite of the pre-marital episode she was a woman of good character.

The first indications of trouble noticed by his friends was heavy drinking. He had for some time been a moderate drinker, drinking always in company, but now at times he drank alone and heavily enough to lose his job. He then became depressed. He soon got another job and the depression cleared up. Meanwhile he stopped drinking. This sudden reform was associated with some ideas regarding the Odd Fellows. He began thinking that he was in ill favor with them for having been untrue to the pledge he took when he joined them. They were therefore watching him. He finally applied to the police for permission to carry a gun to protect himself from his enemies. He then became more and more tense until finally with great emotion he confessed to his wife the promiscuous sex relations, which, it seems, had con-

tinued even after marriage. The wife took the confession in good part. Following this he became more and more agitated and the idea came that something was going to happen to her.

Throughout his stay in the hospital he was in full contact with his surroundings and talked freely and objectively of his difficulties. His mood was predominantly one of anxiety. While at times cheerful, he was constantly on the look-out for something to worry about and he saw dire possibilities in the merest trifle.

His social attitude was frank and co-operative. He preferred to be with others rather than by himself. He took part in the ward activities and attended the dances and movie shows. Not long after admission he was assigned to the carpenter shop. He did good work there. He was also given a ground parole and did not abuse it. He was eager to talk of his problems and came frequently of his own accord to the Chaplain's office, often asking for prayer.

He had never been a man to think seriously or to try to interpret and organize his experiences, but had taken things much as they came. Now, however, his conventional world was smashed to bits and he was trying hard to understand.

Prominent among his ideas is that of an impending world war.

Asked what part he was to have in this war, he replied, "Well, it's written in the Bible that a little child shall lead them." The most striking feature of this disturbance is his perplexity and his tendency to see hidden meanings in everything that happens.

He feels that he is in a strange and mysterious universe and he is sure only of one thing, that things are not what they seem.

Central in his world are the lodges and the churches. "Lodges," he explains, "are very sacred institutions. If you are in trouble you need the help they can give you." He has not lived up to their rules. They are aware of that fact and have, apparently by the use of occult forces, brought the present disturbance upon him. On one occasion he brought the chaplain a card which he had just received from his lodge. This card contained a telegraph code designed to cover situations with which Odd Fellows frequently have to deal. *Purple* thus meant, "Bury him where he is."

He was greatly troubled by the fact that in the room where he slept there was a flower-pot covered with purple crepe paper.

These fears were greatly augmented by the arrival the next morning of a purple neck-tie, a gift from his wife. He has also found great significance in the number *five*. On one occasion in his presence another patient had been informed of a gift of five dollars. This patient had said, "Go to hell." A little later he had been visited by five friends in one day. Again he had asked for a match and had been given five matches. These things seemed to him most ominous.

Very striking is his tendency to blame himself. He is sure he is responsible for the death of the mistress upon whom the illegal operation was performed; and since his wife had had a similar operation, he fears that she also will die of carcinoma. He feels that the lodges are fully justified in singling him out for disciplinary action. This self-blame stands in marked contrast to the persecutory trends so prominent at the beginning of the disturbed period.

II

This case is a striking example of an anxiety reaction carried to the point of severe psychosis. Here is a man who was outwardly well-adjusted and successful. Although an illegitimate child who had never known who his parents were and who had been adopted only at the age of two, his social attitude was friendly and there was no evidence of hostility, either manifest or repressed. He had been successful in school-room and on the play-ground, in the shop and in the drawing room. He was well-liked by his associates of both sexes. He had done well at his trade and was married to an intelligent and devoted wife. Their sex relations were satisfactory, the home was neatly kept and there were two healthy and attractive children.

And yet this man develops acute anxiety for which, in the eyes of an on-looker, there is no apparent reason. He believes that something is going to happen to himself, to his wife, to his children and he finds direct meanings in every trivial happening.

Closer examination, however, shows that his anxiety was not uncalled for. He was a well-meaning chap who had made a mess of his relationships with the significant persons in his life. It it not necessary to lay overmuch stress upon his sexual promiscuity. He was indeed a product of American Protestant culture. He had accepted the standards of the church in which he had been reared, and by those standards he had been weighed and found wanting. Even though he had never taken his religion very seriously, he could hardly avoid a considerable sense of guilt. But back of any such sense of guilt were the personal relationships of which his ethical standards were merely functions. First of all there would be the relationship to his pious foster-parents, who had given him real affection and from whom his ideas of right and wrong had been derived. He would be keenly aware of the fact that his foster-mother would not approve of his style of life. Most important in this disturbance, however, was the mistress, a woman older than himself, who had apparently played a mother's role in his later adolescence. This woman had twice become pregnant by him and on both occasions operations for abortion were performed. The circumstances under which he had got married were also irregular. He had got his wife in trouble before their marriage and again an abortion had been performed. We do not know how the other woman

felt about this marriage. What we do know is that about the time the disturbance began, this other woman died of carcinoma and that he held himself responsible for her death. This means that he had been in his own eyes disloyal to the "mother figure." He was also much concerned over the fact that he had been responsible for snuffing out the lives of three unborn children. He had thus been disloyal in the relationships which were nuclear in his personality organization, relationships which had to do with his biological role as son and father, and were associated with his idea of God.

He had thus reason to be anxious. To feel oneself cut off from the inwardly conceived fellowship of the best involves the threat of spiritual death and dissolution. To find a rational, healthy-minded solution for such a situation is no easy matter. What was called for was a change in his way of life, and that required heroic measures. What he actually did was to pass through a whole gamut of pathological reactions.

First of all we see him trying to escape from his torturing conscience by resorting to alcohol. This solution would of course have provided an open road to oblivion, but also to destruction and dissolution. It would have meant release from anxiety by throwing in the sponge and refusing to fight. This drinking continued for a number of months until he lost his job.

The loss of the job has a sobering effect. He goes into a depression. He begins now to face reality. He blames himself and he stops drinking.

He then finds another job and the depression disappears. His conscience, however, is still inflamed, still very troublesome, and he resorts to another escape device. He develops the idea that the Odd Fellows are after him because he was untrue to the oath he took when he joined their order. We notice that this idea served a useful purpose. It helped to keep him away from alcohol, but it did not free him from inner tension. It meant that his conscience had become externalized. He had built within himself a face-to-face community in which Mrs. Grundy ruled supreme. But it was control from without, control by fear, and the anxiety kept mounting until he finally went to the police asking for a permit to carry a gun in order to protect himself from his enemies. He was thus seeking to escape self-blame by disowning the group with which he had identified himself. But the disowned conscience came back at him in the form of accusing voices and ideas of reference. Such a solution lessens the danger of dissolution, but it involves profound isolation.

The next step was a confession to his wife. He tells her of his sexual promiscuity, something which had continued even after their marriage. Probably she knew something about it already. In any case she took it in good part.

Following the confession the agitation did not abate. On the contrary it increased to the point where commitment became necessary. There was, however, a significant change of attitude. He began to worry about his wife and he became very much concerned about religion. It seemed that a great war was impending and that in this war he was to have a very important role. A striking feature of his condition at this time was the tendency to see hidden meanings in trivial happenings.

At the time of admission to the hospital his anxiety was so great and his thinking so distorted that most of the staff thought the prognosis poor. He cleared up, however, inside of three months and during the four years in which I followed the case the home adjustments were excellent.

III

It is important to recognize that the turning point in this man's recovery is to be found in the confession to his wife. Before that his reactions had been of the malignant type. He had sought escape in drink. He had refused to listen to the promptings of his conscience and had developed ideas of persecution. With the confession the entire picture changed and the reaction became a benign one.

But why this change? Most of those who try to drown their troubles in alcohol do not get well. So also the paranoics. Their delusional systems become increasingly hard to change. Why should this man develop the benign reaction of self-blame and confession? The explanation is to be found in the character of the man. He was an out-going, frank, friendly fellow with many real assets and it was not natural for him to throw in the sponge or to resort to concealment.

A second question has to do with the increased emotional disturbance which followed his confession. Inasmuch as confession is basic in all psychotherapy it might be assumed that it would lessen the emotional tensions. The answer is that it was the increased emotional pressure which forced the confession, and it took time for this emotion to subside. The process may be compared with that in the development of an abscess, where the poisonous matter is gathered together into a "head" which then breaks open and lets the poisons out.

A third question has to do with the ideation which characterizes the acute disturbances of the type represented in this case. He thought he was about to die. He believed that enormously important issues were at stake. A great war was impending. When asked regarding his role in this war, he replied, "A little child shall lead them." Clearly he had the same constellation of ideas which characterize so many acutely disturbed schizophrenics. What do these ideas mean?

An explanation of the ideas of world disaster was offered years ago by Professor Freud in his famous discussion of the Schreber Case[2]. Such ideas, he said, are the projection of the inner catastrophe. They betoken the going to pieces of the patient's own inner organization. Following such a catastrophe, he holds, this inner world may be re-built. In that case we have a paranoic formation. If it is not re-built, if the victory goes to the segmental tendencies and fragmentation continues, then we have dementia praexcox of the hebephrenic type. In this interpretation Freud assumes that the re-built world will be inferior to the original one. He does not go on to suggest that it may be superior. But that, according to my observation, does happen, and therein we may find the significance of disturbances of this type. They are desperate attempts at re-organization which may be and sometimes are successful.

The usual explanation of the ideas of grandeur is that of wishful thinking. In some cases this explanation has elements of truth. I am, however, convinced through the careful study of a large number of these cases that in most of them such an explanation is shallow and misleading and that actually such patients are groping after a true insight of tremendous import[3]. Certainly religion all through the ages has taught that the human soul is infinite in value; and what is nuclear science telling us today but that each individual person, no matter how commonplace, is literally a galaxy of solar systems? Our patient would then have had his eyes opened to a staggering new concept of himself, one that upset the foundations of all his judgments and called for a thorough-going re-organization beginning with the very core of his being. It was an experience which left him sure of only one thing, that things were not what they seemed to be. Hence his attempt to read hidden meanings into every trivial happening.

In explaining his final recovery, it is important to notice the change of attitude which followed his confession. He begins now to worry about his wife. This is of course a most favorable development. The fact that she took the confession in good part meant that the emotional strain was shared and he identified himself with her.

We have now seen that this man in spite of an anxiety reaction which was carried to the point of severe psychosis, made an excellent recovery. This case may therefore serve to exemplify my thesis that anxiety is not in itself an evil but may instead give evidence that the healing forces are at work.

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[2] *Collected Papers*, Tr. by Alex and James Strachey, London, Hogarth Press, 1949. Vol. III, p. 387 ff.

[3] Cf. "Form and Content of Schizophrenic Thinking," *Psychiatry*, 1942. "Onset in Acute Schizophrenia", *Psychiatry*, 1947.

IV

I have not thus far submitted evidence in support of the converse proposition that when dissolution takes place anxiety tends to disappear. Perhaps it may be sufficient for our purpose to refer to the many psychiatric text-books which tell us that dementia praecox is characterized by *lack of affect*. As applied to the acute phases of schizophrenia nothing could be more misleading than such a statement. But as applied to those who have thrown in the sponge, to those who have made and accepted some adaptation to defeat and failure, it does hold. When dissolution is an accomplished fact, anxiety and suffering tend to cease.

V

The case of John P. was selected for our consideration as one which can best be explained in terms of an uneasy conscience. It is not to be assumed that all anxiety can be so explained. The threat may be to some cause or value with which the sufferer has identified himself. Such was the case with some of the Hebrew prophets, who took the sufferings of their people so much to heart that they developed a severe psychosis. A mother may feel profound anxiety because of a wayward son; or a young man confronted with a major decision and standing face to face with the unknown may pass through a period of soul-searching anxiety. Every crisis period is a period of opportunity and also of danger. It may result in religious quickening or it may eventuate in mental illness. Nonetheless this case is representative in that the locus of the disturbance in most cases of functional mental illness is to be found in an uneasy conscience. It follows, therefore, that not only in this case but in most other cases of "neurotic" difficulty true understanding is dependent upon a correct concept of conscience. It is here that I find so much that is confusing and misleading in present-day psychoanalytic thinking.

In this brief paper I have neither time nor space to deal with the differing views now current. I shall merely point out that Freud and his associates have made a most important contribution in their recognition of intra-psychic conflict between the social self and instinctual desires as a major factor in functional mental illness. In doing so, however, they have failed to do justice to the role of conscience in the development of the individual and of the group. They have seen it rather in its negative aspects as a factor in mental illness. They agree in stressing its origin in the authoritarian teaching of parents and early guides. They hold tht the "superego" must be broken up and replaced by a rational "ego" before an individual is mature. They also stress the danger of perfectionism. And there is to-day a tendency to see in hostility the mainspring of all neurotic character formation instead of a protective device against the sense of personal failure.

What is lacking in most of the current psychoanalytic thinking is the recognition of the social basis of the personality as set forth by such thinkers as Mead and Dewey. According to this view, the personality is the internalization of the socially accepted beliefs and attitudes in the form of conscience. Functional mental illness is thus the price we have to pay for being men and having the power of choice and the capacity for growth. The lower orders of the animal creation do the right thing automatically. They co-operate because of the way they are built. In the case of human beings, however, it is necessary to learn to do the right thing through inner self-direction and failure to do so results in anxiety and inner distress. The process thus involved is described by Professor Dewey in the following words:

> When a child acts, those about him react. They shower encouragement upon him, visit him with approval, or they bestow frowns and rebukes. What others do to us when we act is as natural a consequence of our action as what fire does to us when we plunge our hands in it. . . . In language and imagination we rehearse the responses of others just as we dramatically enact other consequences. We foreknow how others will act and the foreknowledge is the beginning of judgment passed on the action. We know with them; there is conscience. An assembly is formed within the breast which discusses and appraises proposed and performed acts. The community without becomes a forum and tribunal within, a judgment-seat of charges, assessments and exculpations. Our thoughts and our actions are saturated with the ideas others entertain about them, ideas which have been expressed not only in explicit instruction but still more effectively in reaction to our acts"[4].

The point to stress here is that according to Dewey, who expresses also Mead's view, the personality is a social product. We incorporate within ourselves the attitudes of others and judge ourselves through their eyes, particularly those whom we love and whose authority we accept. From this there is no escape. For all of us there must be some inwardly accepted representative of authority whose love and fellowship is necessary to us, and our ideas of right and wrong are functions of these relationships. Herein we may find the significance of the idea of God. It is a symbol of that fellowship without which we cannot live; and since all of us are social beings, the idea of God represents something which is operative in all men whether they recognize it or not. There seems to be a law within which forbids us to be satisfied with any fellowship save that of the best, and to be cut off from that fellowship is dissolution and death. Banishment from that fellowship is then the anxiety-producing threat in the acute forms of functional mental illness.

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[4] *Human Nature and Conduct.* New York, Holt, 1922. p. 315.

A consequence of this view would be a reversal of the Freudian doctrine that conscience and religion are derived from the parental relationships. It would follow that the parents themselves derive their significance to the young child from the fact that they are representatives of that in the Universe upon which he is dependent for love and for protection. Maturity then requires not just release from parental apron-strings but learning to see the parents as representative of something beyond. It calls for the transfer of loyalty from the finite to the infinite.

Professor Hocking, who approaches the problem from a somewhat different standpoint, offers an illuminating suggestion. Instead of magnifying the authoritarian aspects of conscience, he places it upon the *growing edge* of human nature. Conscience for him is the artistic sense in the field of interpersonal relations which tells us of our success or failure in maintaining our status and our growth[5].

IV

It follows from this study that mental illness of the non-organic type is not only associated with a function of greatest social significance, but in certain of its forms it is a manifestation of nature's power to heal. This applies particularly to those forms which are characterized by acute anxiety and in which no adaptation to defeat and failure has been made and accepted. Such a type is represented by John P. The principle involved is of far-reaching import and should receive more attention from those who are approaching the problems of the men tally ill from the standpoint of the minister of religion. This principle has been stated by Professor Hocking in words with which I shall bring this paper to a close:

> Religion has constantly reminded man how hardly he may earn immortality. It has made him pray with a touch of fear, "Take not thy Holy Spirit from me." There are those who refer to this state of mind as "anxiety neurosis." It may become such, but in substance it is simply the original man in his wholeness facing the reality of his sinful status. Others have called it "the divine spark which somehow disturbs our clod." Names matter little, but the disturbed state is one of increased, not lessened awareness of truth[6].

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[5] *Human Nature and Its Re-making.* New Haven, Yale University Press, 1923. Pp. 123-124.

[6] Ibid., p. 186.

LOVE AND FEAR:
A PSYCHIATRIC INTERPRETATION

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RELIGION and psychiatry are both concerned with the human soul, its striving for integrity and peace, and the emotional disturbances that interfere with its development. The writer belongs to a group of psychiatrists who are inclined to consider religion as a universal human endowment. Man may be conscious or unconscious of his religious endowment. It may be fully developed, underdeveloped, distorted, or deteriorated. Man may or may not participate in institutionalized religion. He may think of himself as a believer, an agnostic, or an atheist. The writer does not wish to underrate the importance of conscious rational elaborations of theological and philosophical concerns, but what the psychiatrist can contribute to the understanding of religion lies primarily in the field of its emotional preconditions.

In this paper man's religious endowment is considered in very broad terms as the devotion to life. Such broad terms have been suggested by Erich Fromm in his book *Psychoanalysis and Religion* when he defines religion as "any system of thought and action shared by a group which gives the individual a frame of orientation and an object of devotion." This devotion to life is implemented by integrity, security, and peace which are goals of all religions. These goals may be reached by the way of love and devotion, or by means of compulsion and fear. Consequently, the qualities of love and fear are fundamental in our understanding of religion, and in this paper we shall concern ourselves with the psychology of love and fear as the preconditions of man's religious expression.

Modern psychoanalytic psychiatry has taken up the challenge to investigate the disturbances which hamper the development of human potentialities for love, as well as the effects of fear on the integrity of the human soul. In so doing it has found itself in the area of religion.

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having many common concerns with theology. It is true that there are differences in the outlook and training of the theologian and the psychiatrist, and semantic differences make mutual understanding difficult. The psychiatrist who has gone through the studies of science and medicine works with a frame of reference in which dynamic biological concepts play an important role in making psychological functions understandable. But this does not necessarily make the psychiatrist a materialist estranged from the transcendent values that are at the core of all religions. The psychoanalytic psychiatrist sees the human being as a whole—soul and body interwoven—who transcends the boundaries of his personal existence, and needs his fellows to achieve his own integrity. He sees man reaching out for mutuality, belonging, and unity, and he sees the dynamic force that transcends human isolation as the innate potentiality for love.

The Swiss psychiatrist Binswanger, who is influenced by the existentialist philosophies of Europe, has called love a fundamental "existential," i.e., the innate ability for the experience of *We,* of togetherness, and the very stuff of existence. It was the genius of Sigmund Freud to base his psychological exploration on the study of libido—the drive for sexual gratification, for affection and tenderness. In one of his later writings he equated libido with the Platonic Eros which transcends individual separateness creating the eternal rejuvenation of life.

The richness of psychoanalytic symbolism surmounts the boundaries of biology and has a stimulating, broadening effect on all psychological understanding. According to the great German poet Goethe "all that is mortal is only a symbol" and hence can become translucent and point to permanent values. For example, the procreative act, the goal of Freud's libido, becomes the symbolic expression of human love, in which the barriers of separateness are swept away by ecstasy, and the anticipated union of sperm and ovum adds the taste of life's creative permanence. This experience of union, togetherness, the experience of the *We,* carries over into all integrative human processes such as true love, friendship, and devotion, which are the most spiritual forms of enthusiasm as we meet them in the varieties of religious experience.

We all know that the experience of pure love is rather infrequent and may get lost, leaving the individual forsaken, humiliated, and on the verge of despair, futility, and nothingness. Love may turn into hate, devotion into clutching dependency. Togetherness may become a prison, instigating rebellion. Without respect, love deteriorates into blind passion, religious devotion into fanaticism and intolerance. The psychiatrist in his work has daily to deal with such shipwrecks of these integrative functions of man. From where does this devastation stem? Freud called the antagonist of Eros the death instinct, the destructive principle, which becomes manifest in the innate emotion

of fear, dread, or anxiety. Fear, like love, is an irreducible factor in human existence, once again an "existential." Let us try to understand fear from its biological roots.

The human infant is born with potentialities for both organization and disorganization. He takes in and assimilates oxygen, fluids, and foods. He grows and expands. At the same time, he rids himself of waste material, infection, injury, and self-generated poison. The process of living is a rhythm of intake and output, in which the integrating powers of development prevail over the disintegrating forces of decay and death.

But death is always with us. As soon as the child is born it is old enough to die. The danger of death hovers over us all our lifetimes, more unconsciously than consciously. The human being is the only animal that knows about his destiny to die. In a symbolic sense, he has to die every day to the yesterday to be open and free for the tomorrow. But he responds automatically to every threat to his survival with the emotion of fear and anxiety.

Fear is a useful danger signal which mobilizes all physiological weapons of defense, increasing respiration and circulation, shifting the optimum of blood pressure from the digestive tract to the nervous and muscular systems which carry out self-defense by fight or flight. In an emergency, under the whip of fear for survival, the human being can achieve almost superhuman feats of self-assertion. But no human being can live under the strenuous regime of emergency continuously: the heightened tension wears out.

Overwhelming fears, particularly fears of long duration, gradually paralyze the defense reactions. The chronically fearful person may suffer from stomach ulcers or hypertension. He can no longer get rid of external attacks or inner poison. He relaxes his vigilance, blinds himself against danger, and falls back on primitive escape mechanisms like magic denial of painful reality, comforting illusions, propitiating gestures, or withdrawal into self-centered preoccupations. Chronic fears may lead to important riddance reactions like rage, anger, resentment, and hate; but they are abortive, unsuccessful attempts at riddance of the evil. Rage and anger lead to fruitless action of destruction. Resentment and hate do not free him from a theatening enemy. Instead they tie him to the evil or to the adversary in an endless thirst for chronic revenge and vindication, which in turn increases fear in a vicious circle. Chronic fear may lead to self-defeat, surrender to the forces of evil, and estrangement from self and others in neurosis, psychosis, or suicide. But as long as there is life there is hope. This hope is linked to the redeeming, forever reintegrating potentialities of love.

No human being can stand the struggle for existence by himself. This is particularly true of the helpless child who can never grow

and develop without the support of a protecting family. We see the budding tenderness, the longing for affection, in a very young child before any notable intellectual development. We also see the fear of helplessness and loneliness in such early stages. In the harmonious unity between mother and child we see the first experience of *We-ness*. This is togetherness with the taste of bliss, serenity, and peace, and is the basis for development towards mature love. In this tenderness, as well as in the potentialities of fear, we see the roots of man's religious endowment. Every human being is potentially religious, having the endowment of love, mutuality, and integration with his fellows as well as the fear of helplessness and loneliness.

No child can be brought up without experiences of acute fear. No adult can progress in his development without occasional fear. Every step forward, every broadening of the horizon, every confrontation with the new is unfamiliar and seems loaded with danger. Every step that transcends the danger increases trust and confidence. We call the fortitude which transcends fear religious faith. It stems from the strength of love. In the failures of religious development we see a surrender to chronic fear which may become insurmountable. In states of chronic fear, life and God and human fellowship can no longer be experienced as fundamentally benevolent or imbued with the potentialities of love.

Chronic fear, the distrust in life, the despair in the "Ground of Existence" (be it called God or remain unnamed), the disbelief in self as well as one's fellows, leads to religious impotence and to serious failures in living. Frequently these failures stem from childhood experiences in a family where the disintegrating forces of chronic fear prevailed and left the child chronically helpless and lonely. The child might have been exposed to unnecessary dangers beyond his scope by neglectful parents, or he may have been wrapped in the cotton wool of overprotection by a chronically fearful parent so that he could not learn to use and trust his own resources. Love is the best teacher. The spontaneous togetherness, the *We-ness* of parent and child, gives the parent the intuitive feeling of what the child in a given moment can do or not do, take or not take. Parental devotion elicits the child's trust: trust in the parent and trust in himself. In an atmosphere of love the child can learn to take the unavoidable pains, frustrations, illness, injury, and bad luck in his stride. In an atmosphere of love, he can learn the gradual adjustment to reality and consequent devotion to life.

But love cannot be forced. It cannot be produced by effort or moral will power since life is the spontaneous expression of the *We*-experience. Much goes wrong in a family due to the moral pressure of misunderstood religion distorted by chronic fear. If love is set up as a moral commandment which the parent and child must obey, this

authoritarian commandment nips the development of love, enthusiasm, and devotion in the bud.

If a person feels obliged to love his child, his parent, or any other intimate companion and finds for one reason or another that he cannot since no spontaneous enthusiasm is there, then the unfilled authoritarian obligation engenders a state of chronic fear which we call guilt. The guilty person does not so much feel confronted by realistic dangers, as by the fear of being rejected by a powerful authority who might turn his malevolence against him. The guilty or sinful person feels ostracized from the fellowship of the good. Guilt, like chronic fear, gives rise to the vicious cycle of riddance-reactions like rage, anger and hate. These in turn increase the sense of unfulfilled obligations, guilt, and fear of retaliation and punishment.

Spontaneous love unites, transcends danger, and expels fear. But compulsion and obligation isolate, engendering chronic fear which makes danger look insurmountable. It disintegrates relationships and in the long run disintegrates the individual self, since no human being can stand continuous isolation. Only when compulsion can be voluntarily accepted in the spirit of love as unavoidable necessity can fear and guilt be transcended and the individual reconciled with the hardships of compulsion. Unmitigated compulsion is a deteriorating factor in every religion, since it leaves the individual in the clutches of chronic fear and guilt.

Under the pressure of authoritative compulsion the potentialities of love and devotion deteriorate frequently into artificial imitations of love. These often cover repressed and dissociated fear and its derivatives—anger and hate. Since love holds the promise of peace and security, the fearful or hateful person often pretends that he is loving. He is afraid that if he would come out honestly with his distrust and suspicion he might be ostracized and painfully isolated. Hypocritical pretense of love is used as a shield of self protection, and a fearful or hateful person may easily believe in his own pretense since it is painful to admit fear and hate even to one's self. Nothing has discredited and distorted religion as much as the hypocritical pretense of love and devotion. Yet it is true that sometime such hypocrisy implies a yearning for true love.

A fearful relation to worldly or heavenly authority leads to manipulative exploitation, parasitic dependence, submissive docility, and abject search for approval. The dependent individual holds out his self-denial, the sacrifice of his truthful self, as a bribery to win the authority—be it deity, a powerful person, or a group—over to his side for the opportunistic purpose of protection against fear and helplessness. The infantile dependent person who insists on his right to approval and protection little understands that he impoverishes him-

self by underrating his own creative resources. Such opportunistic maneuvers really increase fear and isolation, since the lack of truth estranges him from himself and from the authority to whom he submits. Falseness stands in the way of meaningful togetherness.

Not only are the destructive emotions of rage, anger, and hate denied, repressed, or dissociated, in the desperate struggle for a failing self defense in a more or less isolated individual; but also chronic fear makes him shy away sometimes from the very healing power of love in himself. Disappointed and frustrated in his longing and reaching out for love, he has become hopeless and fearful. He withdraws the bridges defiantly, displays his anger or hatred openly, and antagonizes his partner intentionally. He thinks at least that if he prepares war by taunting belligerence he can no longer be disappointed, and the hatred he receives in response, he boastfully points out, is of his own making. It seems better to him to be prepared for the worst than to open his heart to a hope that may fail again. In such a way a belligerent atheism is sometimes born out of a defeated longing for love.

Self-righteous indignation can become the fortress of the chronically fearful person. Deprived of the grace of togetherness, helpless in his isolation, he is beset by doubts, even by hatred and contempt for himself. In despair he tries to prove with violent argumentations or elaborate rationalizations that he is right and the other is wrong.

The fearful, isolated individual strives for self sufficiency when togetherness fails, but no degree of ambitious self-perfection, no attempt at omnipotent or omniscient self-deification can abolish the fundamental human need for mutuality and interdependence. All striving for self aggrandizement is necessarily insatiable, since it cannot abolish the fear of isolation.

Chronic fear and deprivation of the *We*-experience produce hatred of others as well as of self. The unloved person not only feels lonely but also inferior, and out of such inferiority feelings grow the tormenting passions of envy, jealousy, and hoarding stinginess which clings to possessions as if they could fill the inward emptiness. Neither thirst for fame and glory, the ruthless drive for power, nor any other such passions can satisfy the greed of inward emptiness, because they are all inappropriate defenses against chronic fear and inadequate substitutes for the real need for love.

In the emptiness of chronic fear the passions of loveless sexuality mushroom, to betray the longing for closeness and intimacy. But the self-centered orientation of fear uses and misuses the partner as a means for an end, for a momentary gratification of lust, or for the sake of pride and prestige. To the degree that only a self-centered goal is pursued the respect for the other person is lacking and from a fleeting

moment of gratification the isolated individual returns to the emptiness of a loveless existence.

Complete lovelessness does not exist because it is lethal. Existence, Being-in-the-world, is always existence with others. Existence without relatedness to some one or something is, again in the terms of the existentialist-psychiatrist Binswanger, "naked horror." If only I exist, completely unrelatedly, I am absolutely helpless. I cannot be helped, I cannot help myself, and no God can help me. In "naked horror" existence loses even the sense of self-hood. It is not beside itself as it is in the rages of passion, although intense passion threatens existence with horror or the loss of self. This horror usually leads to suicide or psychotic experiences of world catastrophe (Weltuntegang), which Freud interpreted as a total withdrawal of object libido, the failure of Eros, and surrender to chronic fear. The American psychiatrist, Harry Stack Sullivan, who has replaced Freud's libido concept by the concept of "interpersonal relation," also sees in the psychosis the experience of world catastrophe, and a loss of relatedness which "actually menaces one's survival." From this horror the psychotic frequently returns by patching up relations with the help of symptoms of insanity like delusions and phantastic distortions of reality, which are primitive forms of relatedness.

Let me go back from such extreme manifestations of chronic fear, which isolate and destroy human togetherness as well as the integrity of the Self, to the other extreme, the manifestations of human love.

What we see daily in interpersonal relations is seldom pure love, but a mixture of emotions dictated as much by the exigencies of chronic fear as by the yearning for real *"We-ness."* Love is not a sublimated product of sexual biology, nor is it romance or sentimentality. It is not comforting dependency, nor a more or less hypocritical kindness, nor is it ethical altruism. According to Binswanger, love is an irreducible "existential," the living experience of togetherness which transforms existence and transcends into another plane. In love the "I" is no longer threatened by the loss of self in the struggle for existence, nor the "you" tethered by compulsion. I and You are merged in the *We*—togetherness. This *We-ness* is experienced as the most triumphant security and certainty of existence. Chronic fear and the struggle for self-assertion can be transcended, for in the *We-ness* the self is received as a gift of grace.

Yet there is a deeply ingrained embarrassment and shame in admitting a sincere yearning for love, as if it were soft or weak. Particularly in our culture, love, like death, is surrounded by a taboo. This may be because love is spontaneous, beyond the control of will power, and as such is a threat to the Ego. The consequence for our daily living of this taboo surrounding love is that the yearning for love is hidden in

manifold disguises or remains inarticulate. Because of this it is necessary in working out a phenomenology of love to draw, as Binswanger has, on the documents of artists, poets, and the great lovers of mankind who are able to express the inarticulate.

The psychology of love is different in principle from that of chronic fear. Being-in-the-world in its relation to space and time is experienced differently. Chronic fear creates an oppressive closeness in which concessions are made by force or by prudence. The imperative of fear in daily living is "Ote-toi que je m'y mette" (Remove yourself that I take your place). This creates an atmosphere in which everybody is at someone else's throat; or else a cautious, calculated establishment of distance, which holds others at arm's length. In love, togetherness is without pressure, force, or control. The natural gesture of love is the embrace. The fight for rights and for a place under the sun becomes superfluous, for existence as love experiences space as bountiful and infinite. This very infinity of space is not uncanny, it is home, ours, the home of togetherness. In love there is a secure closeness even in spatial separation. As Rilke says: "Home and heaven disappear, only where you are there is my place." As Shakespeare's Juliet says:

> "My bounty is as boundless as the sea,
> My love as deep; the more I give to thee
> The more I have, for both are infinite."

In the sphere of love, closeness is determined by the yearning for union, for totality, and for fullness of existence. The *We* opens up for the Me and the You wider, undreamed of horizons, and gives a freedom that no calculating impartiality could ever provide—the freedom of unpremeditated spontaneity.

If space is experienced in the *We-ness* of love as infinity and home, time is experienced as eternity and simultaneously as the present moment in its richness and fullness. Eternity and infinity are not understood here as the stretching out of time and space by worldly yardsticks. Rather, love experiences infinity as home, and eternity as the moment of fulfillment, while fear is tied to the merciless compulsion of the clock, or recoils from uncanny nothingness. Shakespeare says in the sonnets:

> "Love's not time's fool . . ."
> "Eternal love in love's fresh case weighs not
> the dust and injury of age."

Elizabeth Barrett Browning speaks of love that endures and life that disappears. And Aristophanes in Plato's symposium says:

> "Love must see eternity behind and before it."

Love is outside of the categories of cause and effect and is experienced as an inexplicable miracle. It is a mystery how the I and the You become transparent to each other in the *We-ness*. This mutual understanding does not stem from intellectual grasp, but from the revelation of the heart. A person unable to love would not be able to reveal himself. The existential security of togetherness provides a faith which transcends rational knowledge. Only passion is blind. Love is intensely seeing. It opens hidden potentialities and stimulates their development. It molds and transforms a human being, as can no educational process or transmittance of knowledge. *Eros heauton auxon*—i.e., the self-increasing, ever-productive Eros—opens the sources of creative imagination and inner truthfulness.

Eros does not withdraw the lover into a sterile seclusion from the world. When lovers isolate themselves from the world or when the religious mystic withdraws from reality, we find that it is more likely done upon the promptings of fear, and the invastion of overwhelming fears may cause the decay of love. *Eros heauton auxon* opens horizons beyond the togetherness of You and Me. Robert Browning said to his beloved that his heart went out to her not as to one person, no, as to all that he called goodness. The creative imagination visualizes in the personal You, all that can ever become You to Me. And this is not idealization or deification, produced and driven by fear. The genuine togetherness, the very reality of the *We* sets natural boundaries to the creative imagination. Phantastic falsifications, illusions and deceptions do not grow in the climate of love, they are rather defenses against chronic fear. Love is free from force and violence. It needs no moral inhibitions and prohibitions, and is neither conscientious nor unscrupulous. The happiness and integrity of the You is just as natural a goal for our impulses as the happiness and integrity of the Me. Therefore love is the only secure precondition for human freedom. The reality of the *We* frees You as well as Me to find ourselves. The greater the reality of the *We,* the greater the independence of You and Me. And the greater the independence of You and Me, the greater are the potentialities of the *We*. I-myself and You-yourself exist by the grace of the *We*. The self is revealed by the *We,* and the fearful striving for self-perfection is set at rest.

Love cannot be without solitude. However, solitude is not loneliness in the sense of isolation. The more real the togetherness, the more meaningful is the solitude and vice versa. Solitude is carried by the creative imagination of the *Eros heauton auxon*—by the security in the fullness of existence. Love that cannot stand solitude is dependency and surrenders to fear. The extreme escape from solitude, the compulsive rush from one love-object to another (Don Juanism) approaches the pathology of the manic, while the loneliness which does not dare respond to the yearning for love leads to depression.

The existential certainty of love triumphs even over death. Not that it takes anything away from the intensity of grief. But there is not the bitterness which follows the ultimate termination of a relation in which chronic fear, hate, resentment, dependency, exploitation and possessiveness predominate. Love does not want to rid the self of painful memories. Love does not need the cult of the dead nor the escape into comforting speculations about immortality which are defenses against chronic fears. Eros transcends the contrast between presence and absence. Love is above all separations, since the You is so deeply imprinted in the Me, and the I in the You, that the security of *We-ness* remains intact. This *We*-evidence meets life with what the German philosopher-psychiatrist Jaspers calls "that deep serenity which dwells at the bottom of the inextinguishable grief." Out of the depth of genuine love stems the fortitude to face one's own death, since the salvation from an imprisoning egocentricity sets the longing for personal immortality at rest. The demand for individual immortality stems from fear, just like the tendencies towards self-aggrandizement, omnipotence, omniscience and self-perfection, which are by nature insatiable since they defy reality. Only the creativity of love leads to freedom and peace.

In this psychological analysis of love we keep in mind that in everyday living the manifestations of love and fear are intimately interwoven. Love proves itself daily in marriage, friendship, child-raising, in all meaningful relations, and all of these relations are distinguished by different shades of integration between love and fear. Love permeates the fears of daily living with the spirit of creativeness. Love transforms destructive competition into productivity, makes work meaningful, and steadies the restless ambitions for worldly success. The vision and *Gestalten* of art are born out of the spirit of love, the yearning for eternal, infinite *We-ness*. Love has unlimited healing creativeness and potentialities for reconciliation. Love is the devoted motivation in creative psychotherapy.

I have gone into this lengthy analysis of love (drawn from an article of mine[1]) because I consider this *"Eros heauton auxon"* (which is related to the description of love by the Apostle Paul) as the natural endowment and precondition of personal religion, of the creative devotion to life. Religious creativity in everyone is challenged by chronic fear with its deadening defenses of isolation, compulsion, and destruction. The devotion to life, the creative *We*-experience does not deny but transcends fear and death.

Not only the individual, with his more or less conscious religion, but

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[1] Edith Weigert: "Existentialism and Its Relations to Psychiatry." *Psychiatry*, Vol. 12, No. 4 (November, 1949).

also religious group formation is continuously confronted with the dangers of disintegrating fear. The creative manifestations of religious group life—loyalty to dogma, tenets, group mores, rituals, etc.—may deteriorate into literal obedience to rigid formulae, compulsiveness, and moralistic restrictions or dependency on lifeless conventionalities. Let me give an example: The goal of a classless society, economic justice, and all embracing human brotherhood is in itself a creation of the devotion to life. Yet modern Communism in the pursuit of such ideals has deteriorated into a regime of compulsive, isolating, and destructive authoritarianism. But let us not be self-righteously indignant, which is a defense against fear. Religious groups of a more democratic, or as Fromm puts it, humanistic, character can maintain the devotion to life only by constant self-scrutinizing vigilance against the powers of decay.

The semantic confusion of our time is great. It is hard to form a consensus of the varieties of philosophies, psychologies, and theologies. A mutual understanding can only come from a *We*-experience which transcends boundaries in keeping with the word of Antigone, in Sophocles' great tragedy, "Not to hate with you, but to love with you, I am here." I have tried to condense psychological complexities into the simple fundamentals of love and fear furthering or hampering religious development, the development of the human yearning for freedom and peace. Love, the great healing power of the soul which transcends fear, can not be compelled by moral efforts. We can only try to remove its obstacles by truthful vigilance towards the derivatives of chronic fear which bend and block the yearning for peace. The very existence of the potentialities of devotion to life and spontaneous creativity are a triumphant testimony that the emotional preconditions of religion exist in every human being, and that through them man can transcend fear and isolation, and arrive at a peace that embraces the whole of mankind.

SACRAMENTAL THERAPY

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Introduction

IT was inevitable that the science of psychology and the theology of the Church, though miles apart at the beginning, should some day meet: they both operate on the same material—the human personality. But I know of no prophet who foresaw what a tremendous influence this science would have on the role of the pastor. Today we have what may well be called a whole new science—the science of pastoral counseling.

As I counsel with college students in their personality problems I have thanked God more than once for what I have learned from dynamic psychology. I share the feelings of the Rev. Geo. E. Thomas who testified in a previous issue of *The Journal of Pastoral Care* to the revolutionary effect a year's post graduate work in this field had on his ministry.

As with anything that is new, this psychological approach has absorbed our attention. The job of adjusting it to the resources of the Church has not yet been completed. The Church too has its therapies—psychologically sound before we ever heard of psychology. Not the least of these is the Sacrament of the Lord's Supper. In this Sacrament we have a wealth of therapy that may be going to waste in our Churches because we have not yet learned how it fits in with our new approach.

I

The new science of pastoral counseling is often skeptical of the use of reassurance in helping people in their problems. It is so with good reason. We pastors have overrated and overdone the use of reassurance. It has made our approach too much that of the silver lining. We have been inclined merely to smooth on salve when the sore needed to be lanced. Our reassurance has more often reassured us than our counselees; it may have led them to wonder if we really understood how they felt.

There is a time, however, when people need reassurance, and if it can be given to them, they should have it. There is a place in the ministry of the Church for reassurance. One of those places is in the Sacrament of the Lord's Supper.

The Church, through its office of the keys, gives absolution from the guilt of sin. In so doing, it is ministering to a fundamental problem of the human personality. Guilt is that initial disturbance in the equilibrium of the mind which prepares the way for all manner of fears, resentments, and insecurities.

Because this problem is so fundamental and deep-seated, the Church offers a reassurance of its absolution. This absolution is based on the doctrine of the atonement of Christ. The reassurance of the absolution is a ceremonial remembrance of that atonement. The Sacrament is a buttress to the Word of God. As such it is a reassurance of the forgiveness of sins.

Because he lives in a material world, man's thinking is centered around his sensory experiences. Since the fundamentals of faith—God, soul, immortality—are not based on sensory experience, man's hold upon them is under continual assault. If we could have something tangible to support his belief in the intangible, something visible or invisible, it would be the help he needs psychologically. This purpose the Sacrament fulfills. Christ, the night before his crucifixion, took bread and said to his disciples, "Take, eat, this is my body which is broken for you;" and the cup, saying, "Take, drink, this cup is the new covenant in my blood shed for you and for many for the remission of sins. This do as often as you drink it in remembrance of me."

It was also the night of the Passover meal. This too was a ceremonial remembrance; the people remembered again their ancient deliverance from bondage and death. Through this tangible celebration their minds were connected with that sacred moment of their history. With this event so real it seemed natural to trust in the guidance of God. Christ also was to accomplish a deliverance from bondage and death; therefore He instituted the new remembrance upon the old.

Although the interpretation of the Lord's Supper was the contention that led to the first divisions in Protestantism, the reformers were unified in their awareness of the reassurance in the Sacrament. Zwingli understood the Sacrament as a memorial feast with the earthly elements, bread and wine, symbolizing the heavenly elements, the body and blood of Christ. To him the ceremony commemorated the sacrifice of Christ as the atonement for sin. In celebrating the Lord's Supper the communicants bring again to their minds the efficacy of this sacrifice.

Calvin went further than Zwingli. He too felt the bread and wine symbolized the body and blood of Christ, but he also saw in the Sacrament another symbol. The *partaking* of the bread and wine symbolized the spiritual receiving of the heavenly elements. Bread and wine were the staff of life in food and drink in Jesus' day. As the bread and wine nourish the body, so the spiritual reception of the body

and blood of Christ nourishes the soul. Calvin took this symbolism and made it work a psychological impression. He referred to the Sacraments as a pedagogy of signs to strengthen faith—a certification of the promise of the Gospel.

Luther saw more than symbol in the bread and wine. He believed they were the earthly carriers of the body and blood of Christ. He saw also more than a symbolical partaking of the heavenly element; as the bread and wine are orally received into the body, they carry with them in a "heavenly manner" the body and blood of Christ to the soul. The Sacrament has objective reality in both its seen and unseen elements. To him the benefit of the Sacrament was in the words, "given and shed for you for the remission of sins." It is a means of grace in that the heavenly elements are received for the strengthening of faith. Through its visible sign there is the assurance of personal forgiveness.

II

Jesus sealed the reassurance of the Sacrament when he said, "This do . . . in remembrance of me." In so doing he gave faith a historical anchor. The communicant visualizes the scene of the upper room, Jesus with the twelve, and in spirit joins them in partaking of the elements. Here is something that *happened;* each celebration is a continuation of that event. This, in the communicant's mind, means nearly two thousand years of uninterrupted celebration. He is joining in an act of faith with kindred spirits undisturbed by the limitations of space and time—and even denominations. In all of this there is a sense of security. This is the sentiment behind a World Communion Sunday.

The early Church was a living fellowship. The celebration of the Lord's Supper was a vital part of this fellowship, perhaps being celebrated daily. In this respect the Sacrament is a symbol of another communion—the communion of saints. In the Lord's Supper the fellowship of Christians demonstrated by the common table is made an actual experience by the sharing together of the body of Christ. The love feast of the early Christians, which preceded the common celebration, shows their appreciation of this fellowship in the Sacrament. "The bread which we break, is it not a participation in the body of Christ? Because there is one loaf, we who are many are one body, for we are all partakers of the same loaf." In the Lord's Supper, the fellowship of Christians demonstrated by the common table is made an actual experience by a sharing together of the body of Christ.

The original meaning of the Church is synonymous with this fellowship; in the Apostle's Creed the communion of saints is in apposition to the Holy Christian Church. The trouble with many churches today

is that they have lost this fellowship; people can enter and leave and never be conscious of any communion of saints; the group spirit is gone. The bond of union symbolized by the Sacrament is an empty form in too many churches.

What has happened to the churches has had its effect on the church member. Personality problems develop in the atmosphere of interpersonal isolation. Those who have these problems feel alone in the midst of people. This withdrawal into themselves is both a cause and effect of their problem. What they need is a sense of belonging—of feeling a part of the group. If they should experience the communion of saints their problem would be reduced. The Sacrament was designed to strengthen this communion. If it does not, the fault may lie with those who administer and those who commune. As I intend to show, this sharing is not necessarily a cure in itself, but can be a strong supplement to pastoral counseling toward this end.

The social bond of the Communion is also a vertical one: "The cup of blessing which we bless, is it not a participation of the blood of Christ?" As the communicant partakes of the bread and wine he hears the words, "Take, eat, this is my body; take drink, this cup is the new covenant in my blood." In my counseling I have noticed that when a student feels cut off from the love of people—particularly the love of parents—he also feels cut off from the love of God. If I can help him to experience the love of God, I have found that I have also begun the solution of his problem. The Sacrament is a Communion with Christ—a union consummated in his sacrificial demonstration of love.

III

The celebration of Communion is usually preceded by a confessional service. Based on the Biblical exhortation that a man examine himself before partaking of the Sacrament, the confessional service is in itself an exercise in group therapy. Although practices differ, the confessional usually has these three ingredients: confession, forgiveness, and intention.

Confession. If a person is at all sincere when he confesses his sins to God he is in some measure facing his personal deficiencies. Also he is accepting at least some of the responsibility for them. The fact that the counselor in this case is God increases his chances of being honest with himself. Innately he knows that nothing can be hidden from God even as he knows (subconsciously perhaps) that much can be hidden from his pastor. In this moment of honest introspection he may gain insight into his personality and achieve a better understanding of himself.

Forgiveness. He is asked to face the unpleasantness about himself because he is then offered a way of redemption; after he has acknowl-

edged his shortcomings he hears the good news that God forgives. The forgiveness comes to him as described in the doctrine of the atonement (sacramentally demonstrated in the Communion to follow). In this doctrine he hears that God accepts him as he is; he therefore is encouraged to accept himself.

Intention. His sincerity is not taken for granted. He is asked to face the test: do you intend to overcome your shortcomings? This question impresses upon him his responsibilities. Since a shortage of self-discipline is one of his shortcomings, it may also frustrate him. Therefore the question does not stand alone, but offered with it is the help of God. Do you—by the help of God—intend to amend your sinful life? Here is a promise of a partnership that inspires faith in progress and hope for the future. In becoming aware of his dependence upon God he is indirectly gaining confidence in himself.

In many churches, the congregation participates aloud in the confessional service. This makes the service more personal in adding to it the therapy that comes through self-expression. Also included in the confessional service in some form or other is the pastoral use of the office of the keys. In his official capacity as a called and ordained minister of the Church he pronounces the absolution to the penitent. Assurance of forgiveness! Spoken from his position of authority it has a good chance to succeed in its purpose.

IV

How can a pastor make effective use of the Sacrament in the pastoral care of his people? Communion is divine reassurance. It was instituted because it fills a need in human nature—the need for reassurance. In satisfying this need, the Sacrament can avert emotional disturbances. Its use, therefore, in regard to personality problems is more of a preventative than a cure.

Those who have serious problems may avoid Communion. I have been indebted to this Sacrament on several occasions in spotting difficulties among my people. The first of these came when I was a new pastor of two months. I scarcely knew the congregation. During the first Communion service there was a woman who became so emotional that she refused to take the cup. I followed up the clue and was soon ministering to acute family discord. Another example was Mrs. M. On Communion Sundays she always left before the celebration of the Sacrament. Why? After a few pastoral calls I found out: her worries over a wrong committed years before were aggravated by an unhappy marriage.

Keeping a Communion record is also a help. A reminder to Mr. G., a nominal church member, that he had not communed in a year brought an abnormal response. It so upset him that he could not

sleep and it made him very angry. During my visit with him he released his resentment against the Church, against God, and against life itself that he had hitherto refused to face—except that he stayed away from Communion.

When people have problems and difficulties they feel ashamed. Because this feeling is deep-rooted the reassurance in Communion may not remove it. They feel hypocritical in dining at the sacred table; therefore they avoid it.

There is the danger that the pastor will not recognize in this avoidance a symptom of a deeper problem and will think that his primary task is to urge the delinquent to more frequent partaking. He may do more harm than good. These people are in no shape to take Communion. If they do partake they will feel they have communed unworthily and their guilt will be increased rather than decreased; they are further removed from the help of the Church than before they communed.

There is also the danger that the pastor may resort to the Sacrament as an escape from the responsibility of counseling, just as he may use Scripture and prayer when he becomes uneasy in a delicate situation that calls for pastoral skills. His efficiency is seriously crippled when his own problems of inferiority enter into the pastoral care of his people. It is a question then of whose problem he is really ministering to. The Sacrament is a supplement to counseling and not a substitute for it.

In the counseling relationship the problem can be dislodged from its inner entanglements and can be looked at objectively. When a person has an understanding of his problem and insight into how he can solve it, he is on his way to recovery. His recuperation can be a slow process, however, as he hits snags along the way that cause failure and discouragement. If he were reinforced at these danger points it would better insure his recuperation and certainly speed its progress. The Sacrament can be this reinforcement. It is the divine reassurance that is needed in this shaky period of faltering recovery.

How can a pastor so use the Sacrament to supplement his counseling? Both the Word and the Sacrament are means of grace in themselves; the way they are administered, however, affects their influence. Although two preachers speak from the same text, one may move his congregation and the other may not. The deciding factor is the way they present their message. So also the manner in which the pastor approaches the Sacrament influences the attitudes of his people. Does he conduct the ceremony as a supplement to his counseling or as a perfunctory ritual? If he understands the therapy in the Sacrament and has this in mind during the service he will administer it in a way that encourages this therapy.

A Communion service should be impressive. It should inspire reverence. The effective use of music and of the pastor's voice can do much toward creating this atmosphere. People must be mentally prepared for an experience of reverence. The psychological build-up for Communion is in that part of the service that precedes the Communion. This is the role of the Communion sermon.

If the Communion is the climax of the service, the entire service should be integrated around it. In the sermon, the pastor has an excellent opportunity not only to create an anticipation for the Sacrament but also to explain the purpose and benefits of the Sacrament. As people are psychologically prepared for the therapy of the Sacrament they are in a mood receptive to this therapy. The experience of partaking will mean more to them—and to their needs.

We have been alerted to the need of training pastors in the sound principles of clinical psychology. A need just as urgent is for pastors who are trained in using the resources of the Church in pastoral care. Together they form a science without peer in ministering to human problems.

SOME REFLECTIONS ON PSYCHIATRY AND RELIGION

ERNEST E. BRUDER

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THE subject, psychiatry and religion, is both of interest and concern to many today. Merely to announce that there is going to be a lecture, or that a new book has been written about it, is to command instant attention from many. The success of some of the best sellers which set out to deal with the field has been phenomenal—and still the subject of considerable discussion. There may be no general agreement as to the reason for this, but Rabbi Liebman's *Peace of Mind* (an excellent and very helpful little volume, well worth reading and re-reading) seemed to start the trend. Monsignor Fulton Sheen next tried to follow the Rabbi with his *Peace of Soul* (a volume whose title promises much but which fails dismally to rise to the heights attained by the Rabbi). Then there are the two excellent volumes by Dr. Erich Fromm, the psychoanalyst, considered one of our foremost social scientists: *Man for Himself* and *Psychoanalysis and Religion*. And finally, Dr. David E. Roberts' scholarly and very helpful book, *Psychotherapy and a Christian View of Man*. These volumes dealing with the field of psychiatry and religion have commanded wide attention.

Why should this be so? It is inevitable that we ask the question, but not so easy to provide the answer. Surely the clue might be found in the general anxiety of our times. Everywhere there is confusion and unrest. Never in the history of mankind have we been promised so much—even attained so much—and yet have so found ourselves wanting. The haunting fact remains that our lack has come not as a result of what we need from the world about us but from the impoverishment of our spirits. Ours is a day when standing in the midst of plenty we are starved. Even as we have come to recognize, even though dimly, that the causes of this starvation lie within man rather than nature, so we have come to doubt whether there is anything in which we can believe, anything in which we can place our trust. This bankruptcy of the soul is fertile ground for those who are deeply concerned with these fundamental issues of man's existence.

Address at The Cathedral of The Incarnation, Baltimore, Maryland, November 19, 1950.

Not only is there interest, avid interest, in the subject of psychiatry and religion: there is equally a great concern. To put it plainly, there are many who, though intrigued, are as much made uneasy when the subject comes up.

Perhaps the first thing which comes to our minds when we talk about psychiatry and religion is the conflict which is said to exist between these two disciplines. Much has been said about this. Unfortunately, much of what has been said has only tended to confuse rather than to clarify the issue. Another factor may prove to be even more threatening. There are alarming reports that it is next to impossible to get an appointment with a reasonably reputable psychiatrist simply because the doctors' offices are crowded with people who have come to them with their problems in living. In painful contrast, the clergyman, who has for centuries been regarded as the "physician of the soul," is only infrequently consulted by people who need help because they are confused and uncertain in their relations with each other.

There is much concern because psychiatry is considered to be anti-religious. Ever since Sigmund Freud published his views on religion, many have thought, or at least have feared, lest all religion have no more future than an illusion. However, this criticism which Freud leveled at religion in his *Future of an Illusion* has been ably met by competent experts in the field of psychiatry itself. Dr. Gregory Zilboorg in *Mind, Medicine and Man* points out that Freud in his criticism of religion was allowing himself a most unscientific generalization from the only particulars with which he was acquainted. In short, you cannot condemn all religion, or all religious experience, just because certain people with whom you have worked have found their experience with religion more crippling and destructive than strengthening and life-affirming.

For a further understanding about the relationship of psychiatry and religion, much help can be obtained from the study of Dr. Fromm's works. In them, one finds convincing arguments that religion and psychiatry are not opposed to each other—yet neither are the two disciplines necessarily allies! Since they have in common the same ground of operation, the soul of man, they can at least be complementary. Where these two disciplines can and do respect the integrity and worth of the individual soul, and demonstrate this in practice, there is no conflict between them.

It is relatively easy to see, from the psychiatrist's viewpoint, why these two disciplines are thought to be unalterably opposed, at least if the dogmatic generalizations of Sigmund Freud are accepted uncritically. It is equally easy from the religionist's point of view to find a contradiction if we make a similar mistake, that is if we accept the

authoritarian position of a Monsignor Sheen, with its plea for the subordination of the individual, and set this up as being the ground of religion. But the truth of the matter lies with neither, as it is so seldom to be found in any extreme! Now that the smoke of many of our verbal and pen battles has begun to lift, we are coming to see the issue more clearly.

Again, concern has been expressed because the psychiatrist does a thriving business and the clergyman is often left in rather splendid isolation. This is altogether too true! We, the clergy, have simply not been as helpful as our people have had a right to expect we might be, and the psychiatrist has well-nigh usurped our right to the title of "physician of the soul."

Of course there are good reasons why this is so. First, we in the clergy have not received (as has the psychiatrist) adequate training to prepare us for our work with individuals. Something will be said about this in a moment, because the picture is much more hopeful now than it has been. But there is a second, and quite as pertinent, consideration. There has been too much preoccupation with the preaching of sermons which are condemnatory and critical, and from which the average person is able to obtain little more than an increase of guilt and inferiority feelings. The help he needs so badly cannot come from such sermons!

The other day a fellow staff member told me of a bitter sermon that he listened to on a local radio station. This apparently was a transcription. He heard the voice of the preacher repeat over and over "God's damnation . . . God's damnation . . . God's damnation . . ." until finally somebody came and lifted the needle out of the groove. It would be helpful if we were to face the fact that we *have* been stuck in the groove of a negative and guilt-increasing type of preaching!

Let us consider now the more hopeful side. Today there has come to be a rather marked concern that the theological student in his preparation for the ministry be given training in work *with* people. Books and theory, whether the theory be theology or not, are simply not enough! The new and helpful emphasis has come to be called Clinical Pastoral Training, a type of training in which the student for the ministry works with people in a controlled situation and under supervision. Thus he comes to obtain first-hand information as to what people are really like, what problems make life difficult for them, and the solutions they have attempted. From this he gains a new vantage-point from which he can test the tremendous life giving resources of the Christian Faith and Practice. Such training, having already been given to more than 1200 ministers and seminarians within the past 25 years, has already made a most significant contribution. As a result the Church, through its clergy, has begun to minister more effectively to people with problems in living.

The Concern for the Individual: Respect for his Unique Integrity

Perhaps the first major emphasis in psychiatry of interest to religion is a concern for the individual, and respect for his unique integrity as a person. This is a most welcome note in a day when mass-production, extensive activity, and the preoccupation with crowds have made it most difficult for us to see people as individuals.

The psychiatrist's concern starts with the individual, the individual as he is. This is reflected in the questions which are in the mind of the doctor as he begins working with the patient: "What is the patient trying to tell me about his trouble?" "How did he come to be the way he is?" "What purpose does this illness serve him?" "How can he be helped to face life so he will no longer need to relax on the unhelpful personality responses which are crippling his relations with others?" In such an approach to the patient one seldom finds the attitude which seems to suggest that the patient is "bad" because he does what he does, that he "ought to know better," that he "should exert himself," or even worse, "what would your mother think of you now?"

Such an understanding approach on the part of the psychiatrist obviously indicates a concern for the integrity of the patient's personality, and can nurture an often weak sense of self-esteem. But it can do even more—it spells out that concern in such a way that the patient is never told what to do, though he is led to see for himself what is helpful and non-helpful in his living. Above all he is given a great deal of time to talk over the things which have been so difficult for him. Listening to the patient has been one of the life-saving factors in any doctor-patient relationship. In such a relationship, the patient perhaps for the first time in his life expresses what he really feels without encountering a negative or condemnatory attitude on the part of the listener. To make it possible for him to do this, the doctor very clearly conveys to the patient that he knows the patient never wanted to be as he now is or that he is satisfied with what he has become, but that he has never really been helped to see himself as he is. Just such an approach has given many a patient the strength to do something with his own abilities and personality resources. As a result the patient is able to confront his past failures in living, deal with his present inadequacies, and plan realistically for his future. He no longer has to live his life in a fragmentary manner for he has been helped to achieve a wholeness or health which has come to be his salvation.

The Basic Drive of the Personality is Always Toward Health

To some, what has already been said may sound a little too superficial. It may seem to raise the fear that the speaker is a little too

optimistic about human nature. It may even be thought to contain that dangerous fallacy, "leave man to himself, he will surely find his way to heaven." This is not what is meant! Man's present confusion, the chaos of his personal and international life, are all too present and discordant notes to be alleviated by any such sweet symphony. By himself, man is often a bewildered and frequently all too blind fumbler in the area of interpersonal relations. But true as that may be, it does not invalidate the fact that man is endowed with tremendous life-giving potentialities and that these inevitably drive him on toward health.

So we come to a second major psychiatric formulation: the basic drive of the individual is always toward health. It is a matter of real significance that the psychiatrist should come to this conclusion. After all, the psychiatrist works constantly in the area of human distress. He is daily confronted with the negative factors in human living. It is his task to deal with the failures people have experienced in living with one another and with themselves. It is out of just such experiences that this proposition has developed. Such living human testimony can neither be silenced nor ignored. It is the sick person, the emotionally disturbed individual, the defeated human being, having been given even a modicum of attention, support, and understanding from one not involved in his illness, who has shown remarkable changes in living. No doctor gives himself the credit for having "cured" the patient, for the doctor is too well aware of his own limitations. But what he would probably say is this, that he helped remove the obstacles in the way of the patient's living and the patient "cured" himself. We might add, "It was God who gave the cure, God who is the source of life and its inevitable drive toward the positive and the good;" and we would be right!

Surely it is no surprise to us that there should be so emphatic a pronouncement from the psychiatrist: the basic drive of the personality is toward health. The only surprise might be that the formulation has come to us in such words from a profession many of us have mistakenly been led to believe was both negative and pessimistic in its view of man. To us who have believed in the Doctrine of the Holy Spirit, who have accepted the teaching of St. Paul that we are the Temple of the Holy Spirit, this should be no new understanding. Could it be that our own failures in living have tended to dim our faith so that we no longer dare trust the infinite potentialities with which God, Our Father, has endowed us?

Psychiatry's Emphasis on the Need for a New Relationship

If what has been said so far has any validity, then it must follow that in order to find ourselves we must experience a new relationship.

This is the third great contribution of psychiatry we might consider.

If our awareness of ourselves as unique creations of God and of the almost limitless resources we have in ourselves for health and life have become for us nothing more than theory and the sound of fine words, then we need a new and vital relationship with another. This is what psychiatry has amply demonstrated many times. This is what our religion has always proclaimed to be the essence of its message. Our Lord said: "I am the way, the truth, and the life." "I am the door, by me shall ye enter in . . ." "I came that they might have life, and that they might have it more abundantly." It is significant that this new life appeared not to have come to those who followed Him through anything new He taught, but out of a relationship, a new relationship, which they were able to achieve—*and with Him!* This remains true to this day. New life must inevitably come out of an experience of acceptance we have from another. We call this love—so it is! From love comes life! It is only when we are accepted as we are that we gain the courage to attain a new life.

There is infinite tragedy in the fact that the glorious good news of the new relationship which we can find with one another and with Our God has remained for many of us nothing more than verbalization. We have never quite managed to get beyond the listening to, or the preaching of, fine sermons about how good God is (sermons which often leave us rather irritated, and a little guilty about the feeling). From all this one painful fact emerges quite clearly, deny it as we will: that unless we have known somebody from whom we have experienced love, somebody who reaches out and accepts us as we are, somebody who seeks to help us when we most need help, all else remains little more than the sound of fine words.

This again is not new. We are told by the writer of the Epistle of St. John that "we love because he first loved us." I would interpret this to mean that we are able to love because we have first experienced love. The converse follows: we are unable to love unless we have first experienced love. Without the hope that we shall be loved, that we shall know and be known in actual living human experiences, none of us could live. This was known to the Psalmist who wrote, "I had fainted unless I had believed to see the goodness of the Lord, *in the land of the living.*" In the land of the living . . . that I would still come to know something of the warmth and friendliness of human tenderness. If it were not so, I would utterly have perished.

It would be easy to point to Jesus as having demonstrated that new relationship. Out of his experience he was (as the Prayer Book puts it) "bold to say, *Our Father . . .* " That is because out of his living he had come to know that one could trust, rely on, believe in, have confidence in God as a Father. But we must come to know this relation-

ship for ourselves, from our own living.

How can we know it? Through the experience of a considerate friendliness: through coming to feel understanding, interest, concern, helpfulness; and our need to talk about those things which deeply concern us in our relations with each other. To talk about the things which are important to us so that we can rid ourselves, at least in part, of the horrible loneliness which we have tried to hide, and to be able to be ourselves, just as we are, with others who really matter to us. There is no other way! This we dare to believe is what God is like with us. He accepts us as we are. He does not even ask us to give up our sins before we dare approach Him. And having known Him, the radiance of the new life with Him will make us stronger, so that we need no longer be as dependent on the unhelpful and inadequate patterns we have previously used to hobble our crippled way through life.

This has been at best a most brief outline of what the speaker has come to feel are some of the distinctive emphases of psychiatry which might interest the religionist. The sacredness of the individual personality "for whom Christ died"; the unlimited possibilities for new life in all, "created in the image of God, children of the living God"; and the need for a new relationship by which we can grow into the new life we believe God has divinely intended for us all. These are religion's fundamental concerns.

Psychiatry cannot give us these goals. They are our inalienable right. They are God-given! Psychiatry can only help us to appreciate them, or to see them a little more clearly by helping to remove the obstacles in the way of their attainment. For this, psychiatry uses the same tools which we must use: concern for others, concern for them *as they are;* not a moralistic concern, but a friendly helpful concern. This is an attitude which can recognize that we too have often been as hurt and fearful as they are, as bewildered as they have become, but that even in just such a situation, we have known the acceptance and love of God, and dare to believe that He has received us as we are. Then we can say that the truth has made us free, and our love has overcome our fear.

BOOK REVIEWS

Pastoral Counseling: Its Theory and Practice: Carroll A. Wise; Harper, New York, 1951. 231 pp. $2.75.

Carroll Wise has again written out of his experience, and his writing clearly reveals the helpfulness of this method. Here we find deep understanding of and feeling for people who have difficulties in living, as well as a sound interpretation of the counseling help a pastor may be able to offer. This little volume will prove invaluable to those who are concerned directly with the everyday problems of people, as well as those who by teaching try to interpret such counseling.

The author comes to his task well qualified and prepared. His academic work includes an earned Doctorate in Theology from Boston University. His clinical pastoral training was obtained under the Founder of The Council for Clinical Training, Inc., Dr. Anton T. Boisen. He was Dr. Boisen's successor as chaplain and chaplain-supervisor at the Worcester State Hospital in Massachusetts. Out of this wealth of experience came his first great work, *Religion in Illness and Health,* a classic in the field. He has been a parish counselor at the Hennepin Methodist Church in Minneapolis, Minnesota; a counselor for the Y.W.C.A. and the Y.M.C.A.; Director of the Department of Religion and Health, Toledo Council of Churches; and a Professor at the Boston University School of Theology, before he assumed his present position of Professor of Pastoral Psychology and Counseling at the Garrett Biblical Institute, Evanston, Illinois. He still serves as a counselor on the staff of the Chicago Temple (First Methodist Church) Chicago, Illinois. It is out of such long and intimate contact with *people* that the author helps us to an awareness and understanding of the needs of hurt people. With this he is equally able to point up for us the wealth of our pastoral resources as bearers of the good news which can make for healing.

This awareness and understanding is demonstrated throughout the volume as the author deals with the many and varied aspects of the counseling process. One finds it in the concern about the person of the counselor and what he must have been able to attain in himself before he can be sensitive and responsive to the needs of others; it is evident in the dynamic interpretation offered by which we come to know the individual as a person and the counseling relationship itself; and it speaks eloquently in that it offers no facile nor simple answers to the difficulties people have in their living with others. Such honest sharing of the complexities and difficulties in this area of interpersonal experience has a most salutary effect. It stimulates one's thinking to the extent that one is forced to raise questions which tend to clarify what is being done; and above all it increases our awareness of the opportunities we have as pastors. It may come as a surprise to discover that a volume as professional as this should at the same time be able to achieve the effect of deeply meditative and supportive reading. But such it does; and of such is the quality of understanding.

The underlying thesis of the whole book is Dr. Wise's assertion that the degree to which the counselor is able to come to terms with his own experiences in living is the degree to which he can be effective in his work with others. This then makes the counselor—the person of the counselor—the key to effective counseling relationships. It is only when the pastor is able to enter into his own experiences, his own

successes and failures, his own joys and sorrows, that he can hope to appreciate and help deal with these same experiences in others. Thus the counselor's basic attitude, his fundamental disposition, determines the final outcome of his work. Or as Dr. Wise puts it: "The central problem of the pastor is not what he does for people nor yet what he does to people, but what he is to people."

There next follows an exceedingly important derivative. It is only when there has been a realistic self-acceptance that one is able to recognize and utilize the real center of the counseling relationship. This lies in the process which goes on *between two people* -the interpersonal process so ably formulated by the late Dr. Harry Stack Sullivan--in which both the pastor and parishioner contribute. Without such self-awareness, what is likely to follow is the usual attempt on the part of the 'counselor' to manipulate the counselee either by word or by action.

With this stress on the person of the counselor there is logically a concern for his training, both professional and personal. There is abundant evidence that the author is both acutely, and at times painfully, aware of the great need for training if we would live up to the demands laid upon us by our calling. For *only* through such training can we be helped to assess our awareness of the reasons for doing what we are doing, determine and meet the needs of people who are in trouble, and utilize our knowledge and skill so that they can be of service to us in our work. One of the rich results of such personal preparation is the ability to draw upon our store of warmth and friendliness toward others, without which there can be no constructive interpersonal experience.

This volume suffers from one major defect--the paucity of its clinical material. It would have made the book more helpful had the author included more actual reporting of his counseling experience. With such material one would be in a position to evaluate the effectiveness of the technique used by Dr. Wise, which, though he hesitates to label it, appears to be very much an emphasis on 'reflecting back' to the counselee what is felt to be his real feeling. This reviewer is of the opinion that a counselor with adequate training can be much more directive and active in the counseling relationship than the author would suggest. But in all fairness it ought to be admitted that the same method, used by relatively untrained workers, might easily provide a very helpful means of alleviating the anxiety of the beginner and *not* at the expense of the counselee. This then would provide a real way by which the client might be guaranteed a maximum opportunity to express his real feelings. But this cannot at the moment be determined until we have available for evaluation the actual materials from which such formulations spring.

This volume has been selected as the introductory Gift Book of the newly organized Pastoral Psychology Book Club. It is not only a most wise choice, it is a most helpful one to all concerned with the intricacies of our pastoral opportunities.

ERNEST E. BRUDER

The Marriage Guide: Samuel G. Kling and Esther B. Kling; Prentice-Hall, Inc., New York, 1950. 310 pp. $2.95.

This book is written by a Baltimore lawyer and his wife, a marriage counselor. Together they have written marriage columns in several newspapers across the country.

The book is written in a question-and-answer form. It is extremely simple, somewhat superficial, but attitudinally sound. It deals frankly with all the varied aspects of married life from the use of money to sexual intercourse. The book will be very useful to the less sophisticated, particularly those with limited education

or cultural background. Institutional Chaplains and Clergymen in low and middle class parishes will find this the kind of book many of their people can read and find very helpful.

DON C. SHAW

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Christian Love: Paul E. Johnson; Abingdon-Cokesbury Press, 1951. 240 pp. $3.00.

There is perhaps no area of Christian experience more written about than that which deals with love. There is equally no area in which there is so often little meaningful understanding or communication. Thus Paul Johnson's *Christian Love* deals with a subject in which there is not only much interest, but also one which needs considerable clarification.

The author presents his material from a wide perspective. He begins with the historical need for and interpretation of love, with specific attention given to the Christian heritage. He then moves into a discussion of the dynamics of love—what it is and how it is attained. Next comes its application in the human family with considerable emphasis on education for sexual maturation and adequate marital relationships. From there we are taken into the wider arena of current social issues, and finally emerge with some theoretical considerations for present and future social conduct.

This is certainly an ambitious undertaking! Perhaps the main criticism of the book lies right here—it is much too ambitious and tries to cover much too much. The result is quite disappointing in that though the author hints at the need for it, and at times almost ventures to enter the area, he never quite gives us the material to be very sure of what is meant by Christian love.

What is needed in a book of this sort, dealing as it does with such a fundamental of interpersonal relations, is considerable descriptive material delineating how the theory works in practice. What this reviewer would have liked to see in the book is a series of actual situations in which the author would describe people who have known love, the kind of people these were, the kind of love they knew, the circumstances of this love, and perhaps even some instances in which "love" had failed others. All this the author merely hints at, and we can agree with him that it *should* be so; but those of us who have to deal almost constantly with the wrecks of humanity as we have found them in prisons and hospitals, know too well that just theoretically outlining what we think is meant by love is not enough. We have had cause too long to work with patients who have had parents who have known the "obligations" (p. 55) of love, but not love itself.

There is, of course, much in this volume that would be of tremendous help to the pastor. It is by far superior to anything else that this reviewer knows of in the field. Perhaps its most helpful contribution, and something which receives considerable stress, is the emphasis the author places on the need for understanding and the influence of attitudes in interpersonal relations. A volume like this should provide us with some helpful guide-lines for exploratory research into the dynamics and application of Christian love.

ERNEST E. BRUDER

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Altruistic Love: Pitirim A. Sorokin; The Beacon Press, Boston, 1950. 253 pp. $3.00.

This book is the first publication of the Harvard Research Center of Altruistic

Integration and Creativity. Its focus is the altruistic personality, "its forms, traits and the cause of its altruism." It is a preliminary analysis and evaluation of two population samples. The author is careful throughout to avoid broad generalizations based on these limited samplings, and on the resultant crude analyses of the dynamics of altruistic personality.

The need for such a study in our times, times typified as a "declining sensate phase" of Western culture with "negativistic" values, is great. For while Western culture has devoted great time and expense to the scientific analysis of man as a user of tools, it has not developed an understanding of man as a creative being. This initial study of the Research Center seeks to correct this one-sidedness of the social sciences in order to meet the prime need of men today, "an exuberant blossoming of ethical creativity."

The study consists of two main sections: the first analyzing a selected sample of "good neighbours," and the second treating the Christian saints catalogued in Herbert S. J. Thurston's work, *The Lives of the Saints.* One of the most interesting fruits of this parallel analysis is the light it sheds on the factors of, and roads leading toward, altruistic personality. The most important factor underlying creative love is found in the family. Education is shown to be the least effective, thus exploding one of the favorite presuppositions of Western culture; the philosophy of rationalism. The result of education is too often speech reactional altruism that never reaches beyond the verbal level.

There seem to be two basic routes to altruistic personality: the "fortunate" and the "catastrophic," with variants that include elements of both. This is of particular interest to those concerned with pastoral work. Sorokin presents data which could lead to the implication that infant baptism has a place within the Christian fellowship, provided the child baptized is nurtured in a Chritsian environment. The latter point is essential, as the author makes no neat dichotomy between individualistic or social means for the development and growth of creative personality. Again, this book guides a minister into a balanced job as pastor, concerned with persons, and as prophet, concerned with the social forces that come to bear on those persons.

A good exploratory study of creative personality, this book, once digested, can help the minister as he seeks to create a fellowship of the concerned amongst all men.

EDWIN DE F. BENNETT

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Freud and Christianity: R. S. Lee; A. A. Wyn, New York, 1949. 204 pp. $2.50.
Christianity After Freud: B. G. Sanders; Macmillan, New York, 1950. 157 pp. $1.75.

The work of Freud has inevitably become the focal point of a new and necessary evaluation of religious experience. The hysterical refusal to consider the insights and methods of psychoanalysis with humble realism will do religion no more good than similar tantrums in such well remembered occasions as the announcement of Copernicus and the suggestions of Darwin. Our honest task is to define the limitations and appropriate resources of psychiatry and religion for each other. A denial of conflict between the traditional concepts of Christianity and the new dynamics of psychiatry is as unobservant as the equally extreme denial of common ground on which they might become mutually helpful in their services to humanity.

These two books are serious and profitable essays in this direction. Dr. R. S. Lee is the more straightforward and direct in his treatment of the issue. His first four chapters seek to explain the psychoanalytic method in the simplest terms. This is excellently done, and supplies a concise statement for any amateur or layman in

search of an easily understandable beginning in this complex field. The remaining eight chapters deal with the insights of psychoanalysis as seen in the light of Christian experience. It is here that the author translates the Freudian concepts of the unconscious, the life and death instincts, the influence of the mother and the father on the child, the function of the super-ego, the relation of the super-ego to sin and the atonement, and the relation of the ego and the love of Jesus. These are clearly and competently done, without being subtly complicated with technical or professional thoroughness and vocabulary.

This is altogether a sane and substantially moderate book. It is consistently clear. It is not belligerently defensive about either religion or psychiatry. It does not accept everything Freudian as if it were final truth. And it does sort out, with patience and kindness, those aspects of religion which now appear neurotic or unhealthy in the light of psychiatric practice. Fantasy religion, super-ego religion, the mother fixation in religion, the projective religion, are delineated in context and with ample illustration of the healthy, reality-religion.

Dr. B. G. Sanders approaches the same problem of relationship and interpretation from a totally different angle. He attempts to see what happens to the body of psychiatric belief when God is presupposed as its fundamental starting point rather than the usual scientific atheism of Freud. This leads him to initiate his exploration of the Freudian material through its anthropological and philosophical aspects, rather than the essentially psychoanalytical. The highly dubious theories of Freud contained in *Moses and Monotheism, Totem and Taboo,* and *The Future of an Illusion,* form the structure for Dr. Sanders' experiment in the first section of his book called *Belief in God and the Psychoanalytic Method.* Both the tenuousness of the historical data which Freud used, in some cases practically invented as in the juxtaposition of Akhnetaton and Moses, and the highly presumptive analogical reflections from individualistic patterns of neurosis to elucidate anthropological history, make the whole section very questionable, even after God has been introduced. Even God cannot save a bad argument from being bad. Two factors rise to embarrass the procedure. First, it is quite an assumption to leap from the characteristic syndrome of individual neurosis to the general character of religion, unless one has already capitulated to the theory of religion as in itself being neurotic. Secondly, the anthropological development of religion on such grounds of early trauma, defense, latency, outbreak of the neurosis and partial return of the repressed material, all suggests the necessity of a "collective unconscious," in itself quite empirically without a great deal of evidence. That Freud insists that the unconscious is collective anyhow, scarcely meets the problem.

As the author moves into the second and third sections dealing with "The Sense of Shame and the Origin of Sin," and "The Universal Neurosis and the Divine Psychiatry" respectively, the argument becomes more substantial and I believe more profitable. The relation of sex, shame, power, and pride in which we have come to call "original sin" is elaborated clearly and cogently. In the last section, once again the obsessional character of neurosis dictates the principle of interpretation for the rites of religion. How far this is a valid procedure, particularly in reference to the atonement, remains a question. The incorporation of the Virgin Birth in this kind of an interpretation is certainly strange. In fact the whole Christological structure impresses one as a rather forced amalgamation of data from various modes of thought. One can only understand this, it seems to me, in the light of the author's insistance, in his preface, that one cannot accept one part of psychoanalysis without accepting all of it, or equally one cannot accept portions of Christianity but must take it in toto from Annunciation to Ascension. This is obviously a rigorous and ultimately rather arbitrary basis for seeking the truth.

Of the two, Dr. Lee attempts less, but achieves more.

SAMUEL H. MILLER

The Dignity of Man: Lynn Harold Hough; Abingdon-Cokesbury, New York, 1950. 143 pp. $1.75.

Dr. Hough has done a great thing in summarizing his years of insight and experience in *The Dignity of Man.* In a sense this book appears to me to be a scholarly and classic description of Methodism's general theology over the past 50 years, in which Dr. Hough's influence has been powerful. The style is beautiful, dignified, and strong, drawing freely on the literary masterpieces of many centuries for illustration and illumination of his points.

Every minister should read this little volume, for at least two quite different reasons. First, Dr. Hough witnesses magnificently to the basic dignity of man. The first six chapters alone are rich with insight and understanding which must never be lost to the Christian Faith. Second, to become critical, this book represents a type of theology which has avoided either giving an humble ear to the findings of psychoanalytic research or evaluating as carefully as one might the position of the new orthodoxy regarding sin and evil.

The insights of psychoanalytic research appears to be dismissed by two sentences in Chapter XII: "No doubt there are almost unconscious hangovers from early childhood which it is good to bring into the light and to understand. . . . The problem of the misdirected will and the deliberately chosen purpose of evil is not subject to such treatment." This same understanding—or lack of it—is found in his doctrine of the fellowship and of grace. In his chapter, "The Fellowship of Divine Grace," Dr. Hough writes as though a person experiences grace by himself as he *learns* through Christ of his own basic dignity under God. Following this, the person joins with others who have had similar experience, and these twice-born people become the fellowship. Actually, psychoanalytic data are helping the Church again to understand that grace operates principally if not totally *in* and *through* human relationships. "He that loveth not his brother whom he has seen, how can he love God whom he hath not seen?"

Dr. Hough's understanding of sin and evil appear to be actually naive. "Evil is wrongdoing which is innocent because the doer of the wrong did not in the least understand its moral nature. Sin is voluntary and intentional wrongdoing." Even elaborated upon, these theses are hardly adequate to the problem either from the point of view of the pastor in a counseling relationship, or prophetic preaching.

As a summary of evangelical humanism, however, the books appears to be excel lent. It will stimulate any thinking minister and make many issues stand out more clearly.

DON C. SHAW

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The Psychology of the Suffering Mind: Israel J. Gerber; Jonathan David, New York, 1951. 202 pp. $3.50.

Rabbis employ dynamic insights in their preaching but remain relatively unconcerned with pastoral counseling. Rabbi Gerber, therefore, appears in this volume as a missionary among his colleagues for the cause of pastoral training.

In classic Jewish tradition he hopes to make the case for his innovation more acceptable to his contemporaries by invoking the prestige and sanction of Scripture. In this psychological *midrash* on the Book of Job, the author indicates certain anticipations of pastoral counseling in the help and advice given to Job by his three friends.

This volume also includes literary criticism of the Book of Job, the development of Biblical theology with special reference to the concept of suffering, the psychological significance of the Book of Job, the relationship between religion and psychiatry, etc. Even though a number of helpful insights can be found in the different chapters or monographs, it is questionable whether the author has succeeded in integrating a number of diverse frames of reference and contributing in an intelligent and worthwhile way to our understanding of pastoral counseling or of "suffering minds."

It is one matter to consider the psychological impact of certain theological concepts upon man; it is quite another matter to analyze the etiology and healing of the emotional illness of a particular, idomatic personality. Rabbi Gerber's attempt to deal with both simultaneously appears to the reviewer not only confusing but ill-advised. The fact that Job and his friends are but the dramatist's personification of different theological viewpoints should also have deterred the author from this study; the social history is not adequate even for the study of a hypothetical "case."

Although Rabbi Gerber indicates at one point that Job's psycho-social development (p. 83) must be considered in the explanation of his illness, his presentation on the whole gives the impression that theological conflict was responsible for Job's problems and that *theological* reeducation served as therapy. (As a matter of fact, Rabbi Gerber states that if he were confronted with a contemporary "Job," he would refer him to a psychiatrist and would keep his own role as pastoral counselor in the background as a supportive figure until "Job" was discharged from psychiatric treatment and would be emotionally ready to profit by pastoral counseling.)

The author should have made clear that the "insights that helped relieve his tension and burden" (p. 65) were not intellectual insights about the nature of God but rather Job's deepening insights into his own nature, his understanding of his emotional needs for a particular God concept, his idiomatic way of responding to certain symbols, etc. Theological problems but not case histories can be discussed without reference to psychological determinism.

More pertinent than the philosophizing of Job and his friends for the modern counselor are the various insights from rabbinic literature scattered through Rabbi Gerber's book and particularly the Talmudic reference found on p. 165.

The attention of the reader is called to the warm endorsements of Rabbi Gerber's volume by Robert H. Pfeiffer, Paul E. Johnson, and others, whose comments appear on the cover.

Works similar in scope and method are Albert Schweitzer's *The Psychiatric Study of Jesus* (1913 and 1948), and Morris Braude's *Scriptural Psychiatry* (1946).

ROBERT L. KATZ

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A Comparison of Diagnostic and Functional Casework Concepts: Edited by Cora Kasius; Family Service Association of America, New York, 1950. 169 pp. $2.00.

Professional social work in America at present is divided into two orientations, diagnostic and functional. This "Comparison" is a report of a committee appointed by the Family Service Association to make a study of these two approaches with the hope of finding a basis for integration. Two years of work by the committee, representing both groups, led to the joint conclusion: "Because of the nature and profundity of the differences in philosophy, purpose, and method, the committee is in agreement in believing that these two orientations cannot be effectively reconciled or combined." Many leaders of social work are just as unhappy with this

disunity as are the leaders of the Church with her disunity.

The report contains excellent short summaries of both the diagnostic (Freudian) and functional (Rankian) points of view. The bulk of the book is the presentation of two cases for each orientation with comments on methods used.

The functional approach began to emerge in social work about ten years ago. It is based on Otto Rank's psychology with special emphasis upon the development of a strong will. At the present time its leading exponent is the Pennsylvania School of Social Work. Its influence is greatest in the child placement field of social work. Functionalism with its emphasis upon time limits, and agency function, and the immediate presenting problem, has had some influence upon the diagnostic school.

In contrast to the functional approach, which tends to focus only on the presenting problem, diagnostic workers are concerned with relating the presenting problem of the client to his total life situation. They believe that it is only on the basis of a well rounded psycho-social history that a diagnosis can be established and relevant treatment begun. Also on the basis of such a diagnosis they are much more willing to offer supportive help to a client on a much more lengthy basis than a functional worker. At present the diagnostic approach is the discipline that most social workers receive in graduate training and is dominant in professional practice.

To the reviewer, and to many who are not initiated in functionalism, this school of social work reminds one somewhat of the ascetic band of Essenes, or of a strict monastic order with some elements of self-punishment. The parish clergyman with some acquaintance with counseling will feel more at home in the diagnostic approach. He will find the condensed summary of this approach helpful. Irene M. Josselyn's, *Psycho-Social Development of Children,* however, also published by the Family Service Association of America, 1948, is a much more complete and useful summary of the diagnostic approach. Since the rest of the "Comparison" is of interest mainly to social workers in a rather technical sense, the parish clergyman will find Josselyn's book a better "buy."

JERRY ECHOLS CARPENTER

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The Cliff's Edge: Songs of a Psychotic: Eithne Tabor; Sheed & Ward, New York, 1950. 80 pp. $2.00.

This is a remarkable little volume of poetry. It is the work of a young girl who is only just approaching twenty years of age, written while a patient in a mental hospital with no attempt to disguise the fact that the author is still a patient. But it is even more remarkable for its deep insight and amazing ability to communicate something of the tortuous struggles of a person who is emotionally ill. There is much here which can be of real help to the pastor who is concerned about the hurt of a person, for the author has a keen sense of ability to communicate this feeling in her use of religious ideas and expressions.

It is a profoundly moving experience to read these poems. With Eithne Tabor we literally stand on the cliff's edge and peer into the depths of hell itself; but at the same time one gets the moving conviction that even in this downward look we are drawn closer to God.

ERNEST E. BRUDER

OUR REVIEWERS

Ernest E. Bruder is Chaplain at St. Elizabeth's Hospital, Washington, D. C., and our Editor-in-Chief . . . *Don C. Shaw* is a member of our Editorial Board . . . *Edwin deF. Bennett* is rector of Trinity Memorial Church, Binghamton, N. Y. . . . *Samuel H. Miller* is pastor of the Old Cambridge Baptist Church, Cambridge, Mass. . . . *Robert L. Katz* teaches at Hebrew Union College . . . *Jerry Echols Carpenter* is an Episcopal clergyman now engaged in social casework.

NOTES AND COMMENTS

The *Journal* has received the first issue of *Arzt und Seelsorger* from Dr. Wilhelm Bitter of Stuttgart. It is devoted to a report of the gathering of over a hundred pastors and doctors at the Evangelical Academy at Bad Boll where, between January 8 and 12, they discussed the problems of common interest to medicine, psychiatry, and the ministry. As a result of what appears to have been an epochal interchange, the assembled clergy petitioned the appropriate church authorities to make provision henceforth in all churchly instruction to make use of the findings of psychotherapy, to provide for specialized training in the field for a few selected theologues, and to encourage in future gatherings of the clergy and the medical profession similar to the successful retreat at Bad Boll.

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Another of our Continental correspondents, Dr. V. Baunbaek, reports from Denmark that a conference for physicians and ministers in the diocese of Roskilde was held May 3rd. The theme of the conference was "Conflicts in Married Life." The introductory lectures were delivered by a bishop, a judge, and a psychiatrist.

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The Menninger Foundation, Topeka, Kansas, has begun a "Marriage and Premarriage Counseling Service." According to the announcement sent us, this service "will offer counseling interviews to individuals and couples, assist groups in the conduct of educational programs relating to marriage, and will provide recommended reading material to persons utilizing this service." This is one more example of the interest psychiatrists are taking in the prevention of psychiatric casualties.

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Those concerned with the counseling of adolescents may want to secure the book and pamphlet lists in this field prepared by Science Research Associates, 228 S. Wabash Ave., Chicago 4.

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Some ministers may find use in their work with the shut-ins and sick leaflets called *Comfort and Strength* published quarterly by the Evangelical and Reformed Church Federation, 3402 Longfellow Blvd., St. Louis 4. Each quarterly mailing consists of six different leaflets. The subscription is low.

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A similar service is provided by the Rev. Allen W. Clark, 44 Cherry St., Danvers, Mass., who writes a weekly one-page worship service he calls *Home Prayers.* Each consists of an opening prayer, Bible reading, 500-word sermon, and closing prayers.

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Much is being done in the way of producing motion pictures that might be helpful to church groups. Various aspects of family living seem to be thoroughly treated. The two companies which have sent us information are the Text-Film Department of the McGraw-Hill Book Co., 330 W. 42nd St., New York 18, and Coronet Films, Coronet Bldg., Chicago 1.